

# — Renewal Information —

## 1. SAVE TIME -- RENEW ONLINE!

The renewal form you received contains detailed information about DOPL's new online renewal system. The greatest advantage is the time you'll save using the online system. Once you have completed the online process, you will be able to immediately print out a confirmation of online renewal which is as valid as a license certificate.

Therefore, the Division strongly encourages you to use the online system. If you wish to renew your license online, but didn't get a renewal ID number, please call (801) 530-6628 or (866) 275-3675 -- toll-free in Utah only.

**Note of Caution:** Do not wait until July 31 to renew! As with most computer systems, waiting until the last day to renew online will take significantly more time if too many of Utah's 19,000 contractors try to renew on the same day, thereby overloading the online system. To avoid the rush, please renew early!

Also, please understand that if your license expires and you later choose to reinstate it, you will be required to submit additional financial information and pay additional fees.

If your license expired in 2001, you must contact the Division to determine your renewal/reinstatement fees.

## 2. IF YOU CHOOSE TO RENEW BY MAIL . . .

A. You must sign both certifications on the renewal coupon. Failure to do so will delay issuance of your renewed license. If you cannot sign the certifications, you must provide adequate documentation, as instructed on the form, explaining why you cannot sign. Please follow all instructions carefully!

B. To avoid delays, please mail in ALL renewal documents and fees:

- signed renewal coupon
- signed check or money order made payable to "DOPL"
- completed "2003/04 Contractor License Renew/Reinstate Questionnaire"

If you or someone you know did not receive a renewal notice and you are not using the online renewal system, you can obtain a generic renewal form at [www.dopl.utah.gov/licensing/contractor](http://www.dopl.utah.gov/licensing/contractor). Select the blue "Applications" bullet. The renewal forms are listed at the top. Mail all generic forms with the fees to DOPL at the address on the form.

## 3. CRITICAL REMINDERS

"Borrowing" or "Lending" One's License: Both activities are class A misdemeanors for each party involved. Even if companies are owned by the same person they may not use one another's contractor license.

Name Used with a Contractor License: If you use a name -- other than the name on your birth certificate -- in your contracting activities, it must be registered with DOPL and with the Utah Division of Corporations as a DBA (doing business as). If it is not registered with both, it is illegal to use. DBA registrations must be renewed every 3 years.

Expired Corporation Registration: Except for a DBA, any expiration of a corporate registration (filed through the Utah Division of Corporations) automatically expires the contractor license of that entity -- no matter what the expiration date is on the contractor license. You must keep all corporate registrations current.

Liability Insurance: ALL active licenses -- whether the license holder is contracting or not -- must maintain the minimum amount of general liability insurance (\$100,000 per occurrence/ \$300,000 aggregate).

# — LRF Special Assessment —

In 1994, the Utah Legislature passed the Utah Residence Lien Restriction and Lien Recovery Fund Act. It provides Utah homeowners with limited protection from mechanics' liens arising as a result of construction on their residences. The Act also created a fund to provide payment for unpaid contractors, suppliers, and laborers who are unable to collect on a lien because of the homeowner protection.

For more information, go to [www.dopl.utah.gov/programs](http://www.dopl.utah.gov/programs) and select "Residence Lien Recovery Fund."

## TOTALS SINCE THE PROGRAM'S INCEPTION (as of 03-31-2003)

Claims Filed	1,465	<u>Claimant Statistics</u>	<u>Claims Paid</u>	<u>Amount Paid</u>
Amount of Claims Filed	\$7,979,237.96	Suppliers	512	\$2,923,439.00
Claims Paid	886	Contractors	368	\$1,573,544.74
Amount of Claims Paid	\$4,506,129.97	Laborers	6	\$ 9,146.23
Claims Denied	292	<hr/>		
Claims Dismissed	141	<u>Fund Balance</u>		
Claims in Prolonged Status	56	As of 12/31/2002		\$1,189,468.77
Claims Pending Prosecutor Review	2			
Claims Pending LRF Board Review	28	As of 03/13/2003		\$1,131,956.94
Claims Pending Claimant Response	14			
Claims Pending Division Review	48			

Utah Code Ann. § 38-11-206(1)(a) requires: "If on December 31 of any year the balance in the [Lien Recovery] fund is less than \$1,500,000, the Division shall make a special assessment against all qualified beneficiaries in an amount that will restore the unencumbered fund balance to not less than \$2,000,000 or more than \$2,500,000."

On December 31, 2002, the Fund's balance was just under \$1.2 million. Therefore, the Division is required by law to issue a special assessment. As part of the February 12, 2003, Residence Lien Recovery Fund Advisory Board Meeting, a public comment meeting was held regarding the proposed amount to be charged in the upcoming special assessment. Based upon the comments made, adjustments were made to the proposed amounts, resulting in the amount of \$125.00, which is included in the total fees shown on your renewal coupon.

Also, for your information, the Division is currently working with several industry groups and legislators to determine an alternate means of funding the Lien Recovery Fund. If you are interested in becoming involved with this process, please contact your state senator or representative. (Go to <http://le.utah.gov/Documents/find.htm> for a list of state legislators.)

The Division recognizes that this special assessment may come as a surprise to many licensees and is likely to be a cause for concern to many, resulting in many questions and/or comments.

**However, since our staff and phone system cannot accommodate a large call volume, you must submit any questions or concerns regarding the special assessment in writing.**

Send your written comments by mail:

DOPL-LRF  
PO BOX 146741  
SALT LAKE CITY UT 84114-6741

by email: [www.utah.dopl.gov/contact](http://www.utah.dopl.gov/contact)

by fax: 801-530-6511



## APPLICATION FOR LICENSE RENEWAL / REINSTATEMENT

LICENSE NUMBER	PROFESSION TITLE	EXPIRATION DATE	RENEWAL FEE	REINSTATEMENTS	INTERNET RENEWAL ID NUMBER
	Contractor with LRF 2003/04 LRF Assessment Total ----->	7/31/2003	\$100.00 \$125.00 <b>\$225.00*</b>	Additional fees are required after the expiration date. See reverse for details.	

### ADDRESS OF RECORD

### LICENSEE CERTIFICATIONS

#### 1. SIGNATURE REQUIRED \*\*

I hereby certify that I have completed or will complete all renewal requirements before the expiration or reinstatement of my current license. I understand that I may be subject to audit.

#### 2. SIGNATURE REQUIRED \*\*

I hereby certify that since the last renewal of this license I have not been convicted of, pled no contest to, or had a plea held in abeyance to a crime which bears a reasonable relationship to my ability to safely or competently practice. I also certify that I have not had any disciplinary action taken against my license in any other state since the last renewal of this license. (If the first renewal for this license, attest to no such action since first issuance of the license.)

↓ DO NOT WRITE OR MARK BELOW THIS LINE. ↓

**NOTE:** \* If your license expired in 2001, you must contact the Division to determine your renewal / reinstatement fees.

(Detach carefully along this perforation.)

**IF ANY OF THE INFORMATION LISTED ABOVE IS INCORRECT,  
PLEASE MAKE ANY NECESSARY CHANGES ON THE BACK OF THIS FORM.**

### SPECIFIC REQUIREMENTS Additional requirements that apply to your occupation or profession are as follows:

If you choose not to renew your license online, you need to return this renewal form, the renewal questionnaire, any additional documentation, and all fees to DOPL by **May 15, 2003**. If you do not, you stand the risk of not receiving a renewed license before the expiration of your current license. Additionally, in accordance with Utah Statute, the following notice is provided with regard to the special assessment for the Lien Recovery Fund:

Utah Code Ann. 38-11-302:

(4) The license renewal notice to a contractor shall notify the licensee that failure to renew his license will result in automatic expiration of his registration as a qualified beneficiary and of the limitations set forth in Subsection (6) on qualified beneficiaries whose registration has expired to make a claim upon the fund . . .  
(6)(a) A qualified beneficiary whose registration expires loses all rights to make a claim upon the fund or receive compensation from the fund resulting from providing qualified service during the period of expiration.  
(b) Except as provided in Section 58-55-401, a qualified beneficiary whose registration expires may make a claim upon the fund or receive compensation from the fund for qualified services provided during the period the qualified beneficiary was part of the fund.

\* If you are unable to sign either of the two certifications above, you must submit with this renewal complete documentation regarding the incident(s). Complete documentation includes any police arrest report, court docket, and probation/parole officer report for each and every arrest and/or conviction. Failure to sign does not mean the license will not be renewed; however, DOPL may request additional information if the documentation is insufficient.

### ON-LINE RENEWAL INFORMATION Save time by renewing your license online at [www.dopl.utah.gov](http://www.dopl.utah.gov)

Most Utah licensees can now renew their professional licenses on-line by using a credit card and a unique "Internet Renewal ID Number" – located in the upper right corner of the renewal coupon above. The new timesaving system allows a renewing licensee to immediately print out a confirmation of renewal that is as valid as a license certificate. Additionally, a renewed license certificate will be mailed to the licensee's address of record within two weeks after the online renewal process is completed and processed.

### RENEWAL / REINSTATEMENT CHECKLIST See reverse for detailed instructions.

- ☐ **Sign the above coupon** in both certification boxes. (If your legal name has changed, submit verification of such.)
- ☐ **Pay the correct fee.** If you are reinstating a license after the expiration date, you must pay an additional reinstatement fee.
- ☐ **Sign your check or money order.** (Make checks or money orders payable to "DOPL.") **DO NOT SEND CASH.**
- ☐ If renewing by mail, submit only your **coupon** and **check** in the enclosed return envelope. All other documentation or information must be mailed in a separate envelope to the address listed at the top of the coupon.

**Unlawful Conduct:** Your license expires on the expiration date shown above unless the license is renewed. If the license expires, you may not practice until a new license is issued. Subsection 58-1-501(1)(a) and Section 58-1-502. U.C.A., respectively, make it unlawful and punishable as a criminal offense to practice your occupation or profession beyond the expiration date on your license.

## NEW MAILING ADDRESS CORRECTION ONLY

Use this space to make any address corrections. Please note that this will be used as your public address of record, which means it is available upon request and via the Internet. It is also the address that will be used for all future correspondence from the Division. You may choose to use a business address or a post office box instead of your home address.

New Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

## LEGAL NAME CHANGE

If your legal name has changed, you must verify the change by attaching a copy of a marriage certificate, divorce decree, court order, driver's license, or social security card. Mail these changes with your coupon, payment, and documentation to DOPL, P.O. BOX 146741, Salt Lake City, UT, 84114-6741. Do not use the enclosed envelope for this purpose.

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

↑ DO NOT WRITE OR MARK IN THE BOX ABOVE. ↑

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

## **INSTRUCTIONS FOR LICENSE RENEWAL / REINSTATEMENT**

### THIS IS THE ONLY NOTICE YOU WILL RECEIVE

**TIMELY RENEWAL:** It is your responsibility to comply with all renewal requirements stated in statute and rule and to promptly submit a completed Application for License Renewal. Due to the volume of renewals to be processed, it can take up to 30 days to process an application. If your completed application is not received at least 30 days before the expiration date shown on the coupon, the Division cannot guarantee that you will receive a new license before your current license expires. You can also renew online at [www.dopl.utah.gov](http://www.dopl.utah.gov) where you can immediately print out a confirmation of renewal.

**APPLICATION APPROVAL:** Your application will be approved unless it is apparent that you do not meet the renewal / reinstatement requirements. Professions with specific requirements listed on the front of this form may be subject to audit by the Division. Those selected for audit will be notified. Please note that the Division reserves the right to initiate action at any time against a licensee who did not meet the renewal / reinstatement requirements at the time the license was issued.

**NON-REFUNDABLE FEES:** Renewal fees paid with this application are for processing your request for renewal of licensure and are non-refundable. Please be aware that simply paying the fees does not mean that your license will be automatically renewed unless you meet the current renewal requirements and thereby qualify for a renewed license.

**REINSTATEMENT FEES:** If you fail to renew your license before the expiration date shown on the coupon, you will be subject to the following conditions:

- A) If you are reinstating your license within 30 days after the expiration date listed on the front of this form, you must submit the renewal fee **PLUS** an additional \$20.00 for **EACH** license being reinstated.
- B) If you are reinstating your license after 30 days and within two years of the expiration date listed on the front of this form, you must submit the renewal fee **PLUS** an additional \$50.00 for **EACH** license being reinstated.
- C) Fees are subject to change each July 1. The fees on the coupon are current at the time this form was printed. Please verify the current fee at [www.dopl.utah.gov](http://www.dopl.utah.gov) if applying for reinstatement more than one year following expiration of your license.

**NOTICE:** If you fail to reinstate your license within 2 years of the expiration date of your license, you must submit a new application, meet current requirements for licensure, and pay the fees specified in subsection R156-1-308d(3).

**INFORMATION UPDATES:** You are responsible to immediately notify the Division of address or name changes as they occur. Please do not rely on forwarding orders to provide the Division with this information. Additionally, if your name change represents a new business entity, you must submit a new application for licensure before beginning practice as the new entity.

**TAX ID NUMBER:** The Tax ID Number for the Division of Occupational and Professional Licensing is 87-6000545.

Complete Contractor Name (as it appears on the license): \_\_\_\_\_

Complete Mailing Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ License Number: \_\_\_\_\_

## 2003/04 CONTRACTOR LICENSE RENEW/REINSTATE QUESTIONNAIRE

**If renewing by mail, complete this form and submit it to the Division with your renewal coupon and fees. If renewing online, you do not need to submit this form. The same questions are asked in the online renewal.**

**Answer "yes" or "no" to each question. Do not leave any question unanswered.**

1. \_\_\_\_\_ Do the licensee's total assets (what is owned) exceed total liabilities (what is owed)?
2. \_\_\_\_\_ Have all state and federal income taxes, payroll withholding, and unemployment insurance premiums been paid as required by law? (Answer "yes" if not applicable.)
3. \_\_\_\_\_ Have all (if any) judgments, liens, taxes, or child support payments been paid as required? (Answer "yes" if not applicable.)
4. \_\_\_\_\_ Has the licensee, while licensed under this license, reported to DOPL all instances of filing for bankruptcy, being subjected to an involuntary petition of bankruptcy, being adjudged bankrupt, or seeking protection under the bankruptcy laws? (Answer "yes" if not applicable.)
5. \_\_\_\_\_ Has continuous general liability insurance coverage of at least \$100,000 for each incident and \$300,000 aggregate been maintained? NOTE: Even if you are not using the license, insurance is still required.
6. \_\_\_\_\_ Has workers' compensation insurance coverage been maintained as required by law? (Answer "yes" if not applicable.)
7. \_\_\_\_\_ Has any claim paid by the Residence Lien Recovery Fund been reimbursed, in full, as required? (Answer "yes" if not applicable.)
8. \_\_\_\_\_ Is the licensee in good standing with all contractor licensing agencies, with no disciplinary actions taken or pending?
9. \_\_\_\_\_ Has the licensee notified DOPL for every change or loss of its qualifier? (Answer "yes" if not applicable.)
10. \_\_\_\_\_ Is the licensee still the same entity the license was originally issued to? (Entity means sole proprietor, corporation, LLC, etc.)

### FOR EVERY "NO" ANSWER ABOVE, ATTACH A COMPLETE WRITTEN EXPLANATION.

Current Business Type: \_\_\_\_\_ (sole-proprietor, corp., partnership, LLC, etc.)

Is your business name or entity registration active with the Division of Corporations? (Answer "yes" or "no.") \_\_\_\_\_

Utah Division of Corporations Registration Number: \_\_\_\_\_

Liability Insurance Carrier Name: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Policy Expiration Date: \_\_\_\_\_ \* \* \* Supply this information only. DO NOT mail any certificates. \* \* \*

Federal Identification Number: \_\_\_\_\_ or Social Security Number: \_\_\_\_\_

I, the undersigned, am authorized to sign this Questionnaire on behalf of the applicant. To the best of my knowledge, the information contained in this Questionnaire is free of fraud, misrepresentation, or omission of material fact; is truthful and correct; and discloses conditions regarding the applicant's financial responsibility.

\_\_\_\_\_  
Print Name of Authorized Signer

\_\_\_\_\_  
Title of Authorized Signer

\_\_\_\_\_  
Signature of Authorized Signer

\_\_\_\_\_  
Date Signed

**NOTE: Save all financial statements, supporting documents (bank statements, etc.), and guaranties used to complete this questionnaire for a minimum of 2 years beyond the license issue date. Information used is subject to audit by the Division.**